



<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b>		Docket Number (Optional) WYTH-P01-002	
In re Application of Pittman et al.			
Application Number 10/643589		Filed August 18, 2003	
For COMPOSITIONS AND METHODS FOR TREATING RAGE-ASSOCIATED DISORDERS			
Art Unit 1646		Examiner Not Yet Assigned	

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows (check time period desired):

- |   |             |
|---|-------------|
| <input type="checkbox"/> One month (37 CFR 1.17(a)(1))              | \$ _____    |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2))             | \$ _____    |
| <input type="checkbox"/> Three months (37 CFR 1.17(a)(3))           | \$ _____    |
| <input checked="" type="checkbox"/> Four months (37 CFR 1.17(a)(4)) | \$ 1,480.00 |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5))            | \$ _____    |
- ☐ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ \_\_\_\_\_.
- ☐ A check in the amount of the fee is enclosed.
- ☐ Payment by credit card. Form PTO-2038 is attached.
- ☒ The Director has already been authorized to charge fees in this application to a Deposit Account.
- ☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 18-1945.
- I have enclosed a duplicate copy of this sheet.

I am the ☐ applicant/inventor.  
☐ assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).  
☒ attorney or agent of record. Registration Number 54,144  
☐ attorney or agent under 37 CFR 1.34(a).  
Registration number if acting under 37 CFR 1.34(a) \_\_\_\_\_

June 30, 2004  
Date  
(617) 951-7546  
Telephone Number

Signature  
Z. Angela Guo  
Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below

<input checked="" type="checkbox"/> Total of 1 forms are submitted.
---

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: Mail Stop Missing Parts, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: 6/30/04 Signature: (Ginny Blundell)